## **SURETY BOND** Money Transmitter

Bond No	Amount
KNOW ALL PERSONS BY THESE PRESENTS:	
That we [applicant],Cou	ofof and State of
as Principal, and [surety] of the State of, and duly licensed to do	, organized and existing under the laws with its principal place of business at
held and firmly bound unto the State of Vermont for the may have a cause of action against us as the Obligo Vermont Statutes Annotated, Chapter 79, Money Service	e use of the State, and of any person or persons who ors of this instrument under the provisions of Title 8 does (the "Act") hereafter described in the sum of nerica, to be paid to the Commissioner of Banking, f the State of Vermont, for which payment well and truly
Whereas, the above bounden Principal has Banking, Insurance, Securities & Health Care Administr business of transmitting money as provided by law uncontrol of the second security of the second secon	
Now Therefore, the condition of this obligat conform to, and abide by each and every provision of lawfully made by the Commissioner, and will pay to the Health Care Administration, State of Vermont, and to a the Obligors any and all monies that may become due a Securities and Health Care Administration, State of Voligors, under and by virtue of the provisions of the otherwise to remain in full force and effect until the Subject, however, to the following conditions:	Commissioner of Banking, Insurance, Securities and ny person or persons having a right of action against and owing to the Commissioner of Banking, Insurance, Vermont, and to such person or persons from said aforementioned Act, then this obligation to be void:
1. The Surety may cancel this bond sixty registered mail to the Principal and the Commissioner, larises from acts or omissions which occur prior to the	
2. Any person who may be damaged by negl on this bond against the Principal or Surety hereon or	ect, default or wrongful act of a licensee may proceed both to recover damages.
3. The Surety shall within five business days making any payment hereon, notify said Commissione	of receipt of notice by the Surety of any claim or upon r of same by registered mail.
In Witness Whereof,	[applicant]
and the said obligation to be duly executed and its corporate seal to of said surety, on this day of	as Surety has caused this be hereunto attached, duly attested for and on behalf
Attest:	
Secretary or Other Authorized Corporate Officer	By: Principal
	By:Surety
(Applicant Seal)	(Surety Seal)